FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

appears in Block 12 or Block 13 if changed,

PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham **ANNUAL REPORT** Secretary of State 97007-8 MIN: no 1997 DIVISION OF CORPORATIONS DOCUMENT # 453396 F & C REALTY, INC. Principal Place of Business Mailing Address 29-28 DITMARS BLVD 29-28 DITMARS BLVD **ASTORIA NY 11105 ASTORIA NY 11105-2731** Date Incorporated or Qualified 05/21/1974 a. Date of Last Report 02/14/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-1609859 21 26 Not Applicable Suite, Apt #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Ζıp Country Country 8. This corporation has liability for intangible tax under s. 199.032, 🗌 Yes 🔀 No 24 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent MORGENTALER, RICHARD, ATTY AT LAW 81 Name Street Address (P.O. Box Number is Not Acceptable 37 -- 01098 -- 020 1550 NE MIAMI GARDNS DR #500 SKYLAKE BNK 82 N. MIAMI BCH. FL 33179 ****550.00 ****550.00 83 City Zip Code 11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. **SIGNATURE** Stgrature, typed or printed name of registered agent and fit off applicable (NO1): Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6) TITLE DELETE Change 1.1 TITLE ___ Addition CARONE, FRANK NAME 1.2 NAME 244 BOWERY ST STREET ADDRESS 1.3 STREET ADDRESS NEW YORK, NY 00000 CITY-ST-ZIP 1.4 CITY - ST - 7/P TITLE DELETE 2.1 TITLE Change Addition FERTITTA, ANNA NAME 2.2 NAME 144-06 VILLIAGE RDL. STREET ADDRESS 2.3 STREET ADDRESS FLUSHING, NY 00000 CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE TIT) F 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3 4. CITY - ST - 71P TITLE DELETE 4.1.1III.E Change Addition NAME 4. 2 NAME REET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 C(1Y - S1 - ZIP TITLE DELETE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE TITLE 6.1 TITLE Addition NAME 62 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP 14. I do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

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